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Substitute for form 1449A/PTO Complete if Known Application Number 10/565029 INFORMATION DISCLOSURE Filing Date September 11, 2006 STATEMENT BY APPLICANT First Named Inventor John Rose Art Unit 1796 (Use as many sheets as necessary) Examiner Name Pepitone, Michael F. Sheet 39262/324491 Attorney Docket Number

			U.S. PATE	ENT DOCUM	MENTS		
Examiner Initials *	Cite No.1	Document Number Number - Kind Code ² (if known)	Publication [MM-DD-YY	Date [of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevan Passages or Relevant <u>Fig</u> ures Appear	
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Examiner	Date	
Signature	Considered	<u> </u>

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